



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

|  |   |    |   |   |  |
|--|---|----|---|---|--|
| Substitute for form 1449/PTO   |   |    |   | <b>Complete if Known</b><br>Application Number 10/549,480-Conf. #8164<br>Filing Date September 15, 2005<br>First Named Inventor Masahiro YAMAKAWA<br>Art Unit 1796<br>Examiner Name K. P. Reddy<br>Attorney Docket Number 4670-0110PUS1 |  |
| <b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b><br><i>(Use as many sheets as necessary)</i> |   |    |   |   |  |
| Sheet  | 2 | of | 2 |   |  |

[illegible]

|                       |                    |
|-----------------------|--------------------|
| Examiner<br>Signature | Date<br>Considered |
|-----------------------|--------------------|

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup>Applicant's unique citation designation number (optional). <sup>2</sup>Applicant is to place a check mark here if English language Translation is attached.